

## DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

EphA2, Hypoproliferative Cel	l Disorders, and Epithelial	claimed a and End	and for which a othelial Recons	patent is sought on the titution	invention entitled	l plana names	
was filed in the United Sta with amendment(s) filed o	udes amendment(s) filed on tes on April 12, 2004 as April 12, 2004 as April (if applicable) onal Application No. on and and understand the content se information known to me to a specific under Title 25. Using the second	d was ame	No. 10/823,259 ended under PC bove identified erial to patentab	T Article 19 on (if appli application, including ility as defined in Title	the claims, as ame	ral	
EARLIEST FOREIG	N APPLICATION(S), IF AN	Y, FILE	D PRIOR TO T	HE FILING DATE O	F THE APPLICAT	TION	
APPLICATION NUMBER	COUNTRY		DATE OF FILING (day, month, year)		PRIORITY CLAIMED		
			<u> </u>		YES □	NO □	
					YES 🗆	NO 🗆	
I hereby claim the benefit under T	itle 35, United States Code, §	119(e) of	any United Sta	tes provisional applica	ation(s) listed below	w.	
	LICATION NUMBER			FILING	DATE	1	
60/462,009			April 11, 2003				
I hereby claim the benefit under Tit matter of each of the claims of this paragraph of Title 35, United States as defined in Title 37, Code of Fede national or PCT international filing	Code §112, I acknowledge t			apprication in the man	ner provided by th	e firet	
NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE			STATUS			
		PA	TENTED	PENDING	ABA	NDONED	

for use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

2 0	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP		FIRST NAME Peter STATE OR FOREIGN COUNTRY Pennsylvania	1	A. COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	2 Saddleview Lane SIGNATURE OF INVENTOR 201	CTTY Doylestown	United States STATE OR COUNTRY Pennsylvania DATE	ZIP CODE 18901	
2 0	FULL NAME OF INVENTOR RESIDENCE & CITIZENSHIP	LAST NAME Kinch crry Laytons ville	FIRST NAME Michael STATE OR FOREIGN COUNTRY	MIDDLE NAME S. COUNTRY OF CITIZENSHIP		
2	POST OFFICE ADDRESS	STREET 19627 Hoover Farm Drive SIGNATURE OF INVENTOR 202	Maryland cmy Laytonsville	United States STATE OR COUNTRY Maryland	ZIP CODE 20882	
2	FULL NAME OF INVENTOR RESIDENCE &	LAST NAME Langermann	FIRST NAME Solomon	MIDDLE NAME		
O CITIZENSHIP  POST OFFICE ADDRESS		Baltimore  STREET  6606 Cross Country Boulevard			ZIP CODE 20878 21215 (54)	
·		SIGNATURE OF INVENTOR 203		DATE 04	21213 (3	



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EphA2, Hypoproliferative Cell	Disorders, and Epithelial a	nd Endo	thelial Recons	titution	mvention entitled		
was filed in the United Sta with amendment(s) filed or was filed as PCT internation. I hereby state that I have reviewe amendment referred to above I acknowledge the duty to discloss Regulations, §1.56.  I hereby claim foreign priority be certificate listed below and have a of the application on which priori	udes amendment(s) filed on (it tes on April 12, 2004 as Applicates on April 12, 2004 as Application No. on and and and understand the contents are information known to me to the inefits under Title 35, United Salso identified below any foreity is claimed:	lication N was ame s of the al o be mate States Co	ended under PC bove identified a rial to patentab de, §119(a)-(d) cation for paten	T Article 19 on (if application, including illity as defined in Title of any foreign application inventor's certification.	the claims, as ame e 37, Code of Fede ation(s) for patent ate having a filing	eral or inventor's date before that	
EARLIEST FOREIG	N APPLICATION(S), IF AN	Y, FILE	D PRIOR TO T	HE FILING DATE O	F THE APPLICA	TION	
APPLICATION NUMBER	COUNTRY		DATE OF FILING (day, month, year)		PRIORITY CLAIMED		
					YES 🗆	NO 🗆	
					YES 🗆	NO 🗆	
I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.							
I .	PLICATION NUMBER			FILING	DATE		
60/462,009			April 11, 2003				
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:							
NON-PROVISIONAL	FILING DATE						
APPLICATION SERIAL NO.	TILING DATE	PATENTED PENDING		ABANDONED			
					TAD/	HOUNED	

for use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME	LAST NAME	FIRST NAME			
2 RES CITI	OF INVENTOR	Kiener Peter		MIDDLE NAME		
	RESIDENCE & CITIZENSHIP	CITY Doylestown	STATE OR FOREIGN COUNTRY Pennsylvania	COUNTRY OF CITIZE	A. COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET 2 Saddleview Lane	CITY Doylestown	United States  STATE OR COUNTRY  Pennsylvania	ZIP CODE 18901	
<del></del>	SIGNATURE OF INVENTOR 201		9/16/01,			
	FULL NAME OF INVENTOR	LAST NAME Kinch	FIRST NAME Michael	MIDDLE NAME S.		
2 RESIDENCE & CITIZENSHIP		crry Laytonsville	STATE OR FOREIGN COUNTRY  Maryland	COUNTRY OF CITIZENSHIP United States		
_	POST OFFICE ADDRESS	STREET 19627 Hoover Farm Drive	Crry Laytonsville	STATE OR COUNTRY Maryland	ZIP CODE 20882	
	SIGNATURE OF INVENTOR 202			9-16-04		
	FULL NAME OF INVENTOR	Last NAME Langermann	FIRST NAME Solomon	MIDDLE NAME		
2 RESIDENCE & CITIZENSHIP  POST OFFICE ADDRESS	RESIDENCE & CITIZENSHIP	STATE OR FOREIGN COUNTRY Baltimore Maryland		COUNTRY OF CITIZENSHIP United States		
		STREET 6606 Cross Country Boulevard	Baltimore	STATE OR COUNTRY Maryland	ZIP CODE 20878	
		SIGNATURE OF INVENTOR 203		DATE		